

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CON-WAY INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

2855 Campus Drive

Suite 300

☐Check if different
than previously
reported. (ACC)

San Mateo

CA

94403

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00110759

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☒July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mark Thickpenny

Signature of Treasurer

Electronically Filed by Mark Thickpenny

Date

07

17

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CON-WAY INC. POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		45527.48
(b) Cash on Hand at Beginning of Reporting Period	45527.48	
(c) Total Receipts (from Line 19)	26133.09	26133.09
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	71660.57	71660.57
7. Total Disbursements (from Line 31)	30000.00	30000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41660.57	41660.57
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CON-WAY INC. POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 0 7

To:

M M
0 6D D
3 0Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	14777.60	14777.60
(i) Itemized (use Schedule A)		
(ii) Unitemized	11299.26	11299.26
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	26076.86	26076.86
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	26076.86	26076.86
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	56.23	56.23
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	26133.09	26133.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	26133.09	26133.09

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		30000.00	30000.00
24. Independent Expenditure (use Schedule E)		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs)		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share		0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		30000.00	30000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		30000.00	30000.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	26076.86	26076.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26076.86	26076.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jacquelyn A. Barretta

Mailing Address 1309 SE 57th

City State Zip Code
 Portland OR 97215

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNF Service Co.

Occupation
VP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11418

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

Full Name (Last, First, Middle Initial)

B. Jacquelyn A. Barretta

Mailing Address 1309 SE 57th

City State Zip Code
 Portland OR 97215

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNF Service Co.

Occupation
VP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11513

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

Full Name (Last, First, Middle Initial)

C. Paul B. Berg

Mailing Address 1615 Forest Creek Dr.

City State Zip Code
 Blue Bell PA 19422

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Central Express

Occupation
Regional Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11746

Amount of Each Receipt this Period

60.00

payroll deduction (\$15x4)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Paul B. Berg			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1615 Forest Creek Dr.			Transaction ID: SA11A1.11427	
City State Zip Code Blue Bell PA 19422		Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		payroll deduction (\$15x4)		
Name of Employer Con-Way Central Express		Occupation Regional Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00		
B. Full Name (Last, First, Middle Initial) Paul B. Berg			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7	
Mailing Address 1615 Forest Creek Dr.			Transaction ID: SA11A1.11522	
City State Zip Code Blue Bell PA 19422		Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C		payroll deduction (\$15x5)		
Name of Employer Con-Way Central Express		Occupation Regional Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		
C. Full Name (Last, First, Middle Initial) Mr. Adam A. Berkowitz			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 130 Challenge Rd.			Transaction ID: SA11A1.11491	
City State Zip Code Raleigh NC 27603		Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		payroll deduction (\$10x4)		
Name of Employer Menlo Logistics		Occupation Sr. Logistics Mgr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Adam A. Berkowitz			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7	
Mailing Address 130 Challenge Rd.			Transaction ID: SA11A1.11587	
City State Zip Code Raleigh NC 27603			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$10x5)	
Name of Employer Menlo Logistics		Occupation Sr. Logistics Mgr.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		
B. Full Name (Last, First, Middle Initial) James R. Bethell			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 18 Norwood Street			Transaction ID: SA11A1.11428	
City State Zip Code Albany NY 12203			Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$10x4)	
Name of Employer Con-Way Central Express		Occupation Mgr. Freight Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		
C. Full Name (Last, First, Middle Initial) James R. Bethell			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7	
Mailing Address 18 Norwood Street			Transaction ID: SA11A1.11523	
City State Zip Code Albany NY 12203			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$10x5)	
Name of Employer Con-Way Central Express		Occupation Mgr. Freight Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		
SUBTOTAL of Receipts This Page (optional)			140.00	
TOTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Craig Boretz Mailing Address 922 NW 11th Avenue City State Zip Code Portland OR 97209 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation VP Tax Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11323 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
B. Full Name (Last, First, Middle Initial) Craig Boretz Mailing Address 922 NW 11th Avenue City State Zip Code Portland OR 97209 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation VP Tax Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11738 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
C. Full Name (Last, First, Middle Initial) Craig Boretz Mailing Address 922 NW 11th Avenue City State Zip Code Portland OR 97209 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation VP Tax Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11419 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
SUBTOTAL of Receipts This Page (optional) ▶		240.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Craig Boretz Mailing Address 922 NW 11th Avenue City State Zip Code Portland OR 97209 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation VP Tax Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11514 Amount of Each Receipt this Period 100.00 payroll deduction (\$20x5)
B. Full Name (Last, First, Middle Initial) Lawrence R. Bowen Mailing Address 2014 N. Forest Ct. City State Zip Code Canby OR 97013 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation Mgr. Claims Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11420 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
C. Full Name (Last, First, Middle Initial) Lawrence R. Bowen Mailing Address 2014 N. Forest Ct. City State Zip Code Canby OR 97013 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation Mgr. Claims Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11515 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
SUBTOTAL of Receipts This Page (optional)		190.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Keith W. Burnett		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7	
Mailing Address 3217 Birch Avenue		Transaction ID: SA11A1.11244	
City Grapevine	State TX	Zip Code 76051	Amount of Each Receipt this Period 147.55
FEC ID number of contributing federal political committee. C			
Name of Employer Con-Way Transportation Service	Occupation VP Admin Services CTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.59		
B. Full Name (Last, First, Middle Initial) Mr. Keith W. Burnett		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7	
Mailing Address 3217 Birch Avenue		Transaction ID: SA11A1.11338	
City Grapevine	State TX	Zip Code 76051	Amount of Each Receipt this Period 122.20
FEC ID number of contributing federal political committee. C			
Name of Employer Con-Way Transportation Service	Occupation VP Admin Services CTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 387.79		
C. Full Name (Last, First, Middle Initial) Mr. Keith W. Burnett		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3217 Birch Avenue		Transaction ID: SA11A1.11753	
City Grapevine	State TX	Zip Code 76051	Amount of Each Receipt this Period 122.20
FEC ID number of contributing federal political committee. C			
Name of Employer Con-Way Transportation Service	Occupation VP Admin Services CTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 509.99		

SUBTOTAL of Receipts This Page (optional)

391.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Keith W. Burnett Mailing Address 3217 Birch Avenue City State Zip Code Grapevine TX 76051 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Service Occupation VP Admin Services CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 632.19		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11433 Amount of Each Receipt this Period 122.20 payroll deduction (\$30.55-x4)
B. Full Name (Last, First, Middle Initial) Mr. Keith W. Burnett Mailing Address 3217 Birch Avenue City State Zip Code Grapevine TX 76051 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Service Occupation VP Admin Services CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 784.94		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11528 Amount of Each Receipt this Period 152.75 payroll deduction (\$30.55-x5)
C. Full Name (Last, First, Middle Initial) Mr. Kevin S. Coel Mailing Address 17686 NW Country Dr. City State Zip Code Portland OR 97229 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation VP Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11421 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)

SUBTOTAL of Receipts This Page (optional)

314.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Kevin S. Coel Mailing Address 17686 NW Country Dr. City Portland State OR Zip Code 97229 FEC ID number of contributing federal political committee. C Name of Employer CNF Service Co. Occupation VP Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11516 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
B. Full Name (Last, First, Middle Initial) Robert E. Corbett Mailing Address 208 North Checkerberry City Jacksonville State FL Zip Code 32259 FEC ID number of contributing federal political committee. C Name of Employer CTS Occupation Mgr. Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11436 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
C. Full Name (Last, First, Middle Initial) Robert E. Corbett Mailing Address 208 North Checkerberry City Jacksonville State FL Zip Code 32259 FEC ID number of contributing federal political committee. C Name of Employer CTS Occupation Mgr. Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11531 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
SUBTOTAL of Receipts This Page (optional) ▶			140.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Karl A. Cushey Mailing Address 10080 Glynwater Court City State Zip Code Granger IN 46530 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Svcs. Occupation Service Center Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.50		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11343 Amount of Each Receipt this Period 74.00 payroll deduction (\$18.5x-4)
B. Full Name (Last, First, Middle Initial) Karl A. Cushey Mailing Address 10080 Glynwater Court City State Zip Code Granger IN 46530 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Svcs. Occupation Service Center Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 314.50		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11758 Amount of Each Receipt this Period 74.00 payroll deduction (\$18.50-x4)
C. Full Name (Last, First, Middle Initial) Karl A. Cushey Mailing Address 10080 Glynwater Court City State Zip Code Granger IN 46530 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Svcs. Occupation Service Center Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 388.50		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11438 Amount of Each Receipt this Period 74.00 payroll deduction (\$18.5x-4)
SUBTOTAL of Receipts This Page (optional)		222.00
TOTAL This Period (last page this line number only)		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 55

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Karl A. Cushey Mailing Address 10080 Glynwater Court City Granger State IN Zip Code 46530 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Svcs. Occupation Service Center Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 481.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11533 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">92.50</td> </tr> </table> payroll deduction (\$18.5x-5)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	7	92.50									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	0		2	0	0	7																								
92.50																																	
B. Full Name (Last, First, Middle Initial) James Dellamaggiore Mailing Address 210 Old Bridge City Anaheim Hills State CA Zip Code 92807 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Western Express Occupation Director- Pricing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11440 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table> payroll deduction (\$10x4)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	40.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	5		1	0		2	0	0	7																								
40.00																																	
C. Full Name (Last, First, Middle Initial) James Dellamaggiore Mailing Address 210 Old Bridge City Anaheim Hills State CA Zip Code 92807 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Western Express Occupation Director- Pricing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11535 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table> payroll deduction (\$10x5)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	7	50.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	0		2	0	0	7																								
50.00																																	
SUBTOTAL of Receipts This Page (optional)			<table border="1"> <tr> <td colspan="10">182.50</td> </tr> </table>	182.50																													
182.50																																	
TOTAL This Period (last page this line number only)			<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																														

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 55

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Scott Engers Mailing Address 1621 Knight Road City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation VP Corporate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11217 Amount of Each Receipt this Period 125.00 payroll deduction (\$25x5)
B. Full Name (Last, First, Middle Initial) Scott Engers Mailing Address 1621 Knight Road City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation VP Corporate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11309 Amount of Each Receipt this Period 100.00 payroll deduction (\$25x4)
C. Full Name (Last, First, Middle Initial) Scott Engers Mailing Address 1621 Knight Road City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation VP Corporate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11725 Amount of Each Receipt this Period 100.00 payroll deduction (\$25x4)
SUBTOTAL of Receipts This Page (optional) ▶		325.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Scott Engers Mailing Address 1621 Knight Road City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation VP Corporate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11405 Amount of Each Receipt this Period 100.00 payroll deduction (\$25x4)
B. Full Name (Last, First, Middle Initial) Scott Engers Mailing Address 1621 Knight Road City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation VP Corporate Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11500 Amount of Each Receipt this Period 125.00 payroll deduction (\$25x5)
C. Full Name (Last, First, Middle Initial) Don Feghtly Mailing Address 4587 Cameron Circle City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way NOW Occupation Director-Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11417 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
SUBTOTAL of Receipts This Page (optional) ▶			265.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Don Fegtlly

Mailing Address 4587 Cameron Circle

City

Dexter

State

MI

Zip Code

48130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way NOW

Occupation

Director-Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11512

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

B.

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 24011 Cormorant Lane

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
CWX

Occupation

Exec. VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11448

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

C.

Full Name (Last, First, Middle Initial)

James P. Gray

Mailing Address 24011 Cormorant Lane

City

Laguna Niguel

State

CA

Zip Code

92677

FEC ID number of contributing
federal political committee.

C

Name of Employer
CWX

Occupation

Exec. VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11544

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Richard Grill Mailing Address 2207 Snapdragon Rd City Naperville State IL Zip Code 60564 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation Regional Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11449 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
B. Full Name (Last, First, Middle Initial) Richard Grill Mailing Address 2207 Snapdragon Rd City Naperville State IL Zip Code 60564 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation Regional Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11545 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
C. Full Name (Last, First, Middle Initial) Kevin M. Hartman Mailing Address 12 Somerset City Dove Canyon State CA Zip Code 92679 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Service Occupation President CWX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00			Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11263 Amount of Each Receipt this Period 250.00 payroll deduction (\$50x5)

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)

Kevin M. Hartman

Mailing Address 12 Somerset

City State Zip Code

Dove Canyon CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvice

Occupation
President CWX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11357

Amount of Each Receipt this Period

200.00

payroll deduction (\$50x4)

B. Full Name (Last, First, Middle Initial)

Kevin M. Hartman

Mailing Address 12 Somerset

City State Zip Code

Dove Canyon CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvice

Occupation
President CWX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11773

Amount of Each Receipt this Period

200.00

payroll deduction (\$50x4)

C. Full Name (Last, First, Middle Initial)

Kevin M. Hartman

Mailing Address 12 Somerset

City State Zip Code

Dove Canyon CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvice

Occupation
President CWX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11452

Amount of Each Receipt this Period

200.00

payroll deduction (\$50x4)

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)

Kevin M. Hartman

Mailing Address 12 Somerset

City State Zip Code
Dove Canyon CA 92679

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvices

Occupation
President CWX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11548

Amount of Each Receipt this Period

250.00

payroll deduction (\$50x5)

B. Full Name (Last, First, Middle Initial)

Harold Jackson

Mailing Address 5491 Waterview Ct.

City State Zip Code
Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvices

Occupation
Director Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11456

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

C. Full Name (Last, First, Middle Initial)

Harold Jackson

Mailing Address 5491 Waterview Ct.

City State Zip Code
Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvices

Occupation
Director Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11552

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Julia Jannausch

Mailing Address 1487 Fieldstone Ct.

City State Zip Code
 Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvices

Occupation
VP--HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11411

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

Full Name (Last, First, Middle Initial)

B. Julia Jannausch

Mailing Address 1487 Fieldstone Ct.

City State Zip Code
 Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvices

Occupation
VP--HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11507

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

Full Name (Last, First, Middle Initial)

C. Todd Johnson

Mailing Address No. 28 Lotus Avenue

City State Zip Code
 Raleigh NC 27611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Menlo Logistics

Occupation
VP Int'l Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11493

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Todd Johnson Mailing Address No. 28 Lotus Avenue City State Zip Code Raleigh NC 27611 FEC ID number of contributing federal political committee. C Name of Employer Menlo Logistics Occupation VP Int'l Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11589 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
B. Full Name (Last, First, Middle Initial) William Kennelly Mailing Address 709 Pimlico Parkway City State Zip Code Sleepy Hollow IL 60118 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation Director--National Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 214.24		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11555 Amount of Each Receipt this Period 41.20 payroll deduction (\$8.24x-5)
C. Full Name (Last, First, Middle Initial) John G. Labrie Mailing Address 5322 Betheny Circle City State Zip Code Superior Township MI 48198 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation VP CNF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11311 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
SUBTOTAL of Receipts This Page (optional) ▶		171.20
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. John G. Labrie

Mailing Address 5322 Betheny Circle

City State Zip Code
 Superior Township MI 48198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sv-
cs.

Occupation
VP CNF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11727

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

B. John G. Labrie

Mailing Address 5322 Betheny Circle

City State Zip Code
 Superior Township MI 48198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sv-
cs.

Occupation
VP CNF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11407

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

C. John G. Labrie

Mailing Address 5322 Betheny Circle

City State Zip Code
 Superior Township MI 48198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sv-
cs.

Occupation
VP CNF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11502

Amount of Each Receipt this Period

100.00

payroll deduction (\$20x5)

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Michael B. Leathers

Mailing Address 130 Streamview Ct.

City State Zip Code
 Fayetteville GA 30215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvs.

Occupation
Manager, Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11460

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

Full Name (Last, First, Middle Initial)

B. Michael B. Leathers

Mailing Address 130 Streamview Ct.

City State Zip Code
 Fayetteville GA 30215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
rvs.

Occupation
Manager, Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11556

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

Full Name (Last, First, Middle Initial)

C. William C. Litty, Jr.

Mailing Address 6277 White Swan Lane

City State Zip Code
 Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sr-
vcs

Occupation
Director--National Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11366

Amount of Each Receipt this Period

60.00

payroll deduction (\$15x4)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. William C. Litty, Jr.

Mailing Address 6277 White Swan Lane

City State Zip Code
 Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sr-
vcs

Occupation
Director--National Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11782

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

B. William C. Litty, Jr.

Mailing Address 6277 White Swan Lane

City State Zip Code
 Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sr-
vcs

Occupation
Director--National Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11461

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

C. William C. Litty, Jr.

Mailing Address 6277 White Swan Lane

City State Zip Code
 Ann Arbor MI 48108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sr-
vcs

Occupation
Director--National Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11557

Amount of Each Receipt this Period

100.00

payroll deduction (\$20x5)

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 55

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Richard J. Lunardi Mailing Address 8 Bennington Court City San Mateo State CA Zip Code 94402 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Services Occupation VP Strategic Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11408 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
B. Full Name (Last, First, Middle Initial) Mr. Richard J. Lunardi Mailing Address 8 Bennington Court City San Mateo State CA Zip Code 94402 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Services Occupation VP Strategic Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11503 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
C. Full Name (Last, First, Middle Initial) Leslie Lundberg Mailing Address 985 Lakeview Way City Redwood City State CA Zip Code 94062 FEC ID number of contributing federal political committee. C Name of Employer CNF Occupation VP Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11214 Amount of Each Receipt this Period 150.00 payroll deduction (\$30x5)
SUBTOTAL of Receipts This Page (optional) ▶		240.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Leslie Lundberg			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7	
Mailing Address 985 Lakeview Way			Transaction ID: SA11A1.11320	
City State Zip Code Redwood City CA 94062			Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$30x4)	
Name of Employer CNF		Occupation VP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		
B. Full Name (Last, First, Middle Initial) Leslie Lundberg			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 985 Lakeview Way			Transaction ID: SA11A1.11735	
City State Zip Code Redwood City CA 94062			Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$30x4)	
Name of Employer CNF		Occupation VP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00		
C. Full Name (Last, First, Middle Initial) Leslie Lundberg			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 985 Lakeview Way			Transaction ID: SA11A1.11416	
City State Zip Code Redwood City CA 94062			Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$30x4)	
Name of Employer CNF		Occupation VP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 630.00		

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Leslie Lundberg Mailing Address 985 Lakeview Way City State Zip Code Redwood City CA 94062 FEC ID number of contributing federal political committee. C Name of Employer Occupation CNF VP Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 780.00		Date of Receipt MM / DD / YYYY 06 / 10 / 2007 Transaction ID: SA11A1.11511 Amount of Each Receipt this Period 150.00 payroll deduction (30x5)
B. Full Name (Last, First, Middle Initial) David S. McClimon Mailing Address 5700 Catherine Ct. City State Zip Code Saline MI 48176 FEC ID number of contributing federal political committee. C Name of Employer Occupation Con-Way Western Express Sr VP CNF/President CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt MM / DD / YYYY 02 / 10 / 2007 Transaction ID: SA11A1.11275 Amount of Each Receipt this Period 200.00 payroll deduction (\$40x5)
C. Full Name (Last, First, Middle Initial) David S. McClimon Mailing Address 5700 Catherine Ct. City State Zip Code Saline MI 48176 FEC ID number of contributing federal political committee. C Name of Employer Occupation Con-Way Western Express Sr VP CNF/President CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt MM / DD / YYYY 03 / 10 / 2007 Transaction ID: SA11A1.11369 Amount of Each Receipt this Period 160.00 payroll deduction (\$40x4)
SUBTOTAL of Receipts This Page (optional) ▶		510.00
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 55

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) David S. McClimon Mailing Address 5700 Catherine Ct. City Saline State MI Zip Code 48176 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Western Express Occupation Sr VP CNF/President CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11786 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">160.00</td> </tr> </table> payroll deduction (\$40x4)	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	7	160.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	4		1	0		2	0	0	7																								
160.00																																	
B. Full Name (Last, First, Middle Initial) David S. McClimon Mailing Address 5700 Catherine Ct. City Saline State MI Zip Code 48176 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Western Express Occupation Sr VP CNF/President CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11464 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">160.00</td> </tr> </table> payroll deduction (\$40x4)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	160.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	5		1	0		2	0	0	7																								
160.00																																	
C. Full Name (Last, First, Middle Initial) David S. McClimon Mailing Address 5700 Catherine Ct. City Saline State MI Zip Code 48176 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Western Express Occupation Sr VP CNF/President CTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1040.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11560 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table> payroll deduction (\$40x5)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	7	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	0		2	0	0	7																								
200.00																																	
SUBTOTAL of Receipts This Page (optional)			<table border="1"> <tr> <td>520.00</td> </tr> </table>	520.00																													
520.00																																	
TOTAL This Period (last page this line number only)			<table border="1"> <tr> <td></td> </tr> </table>																														

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) David L. Miller Mailing Address 313 Cambridge Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation President CCX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00			Date of Receipt MM / DD / YYYY 01 / 10 / 2007 Transaction ID: SA11A1.11174 Amount of Each Receipt this Period 360.00 payroll deduction (\$90x4)
B. Full Name (Last, First, Middle Initial) David L. Miller Mailing Address 313 Cambridge Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation President CCX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 810.00			Date of Receipt MM / DD / YYYY 02 / 10 / 2007 Transaction ID: SA11A1.11276 Amount of Each Receipt this Period 450.00 payroll deduction (\$90x5)
C. Full Name (Last, First, Middle Initial) David L. Miller Mailing Address 313 Cambridge Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation President CCX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1170.00			Date of Receipt MM / DD / YYYY 03 / 10 / 2007 Transaction ID: SA11A1.11370 Amount of Each Receipt this Period 360.00 payroll deduction (\$90x4)

SUBTOTAL of Receipts This Page (optional)

1170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) David L. Miller Mailing Address 313 Cambridge Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation President CCX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1530.00			Date of Receipt MM / DD / YYYY 04 / 10 / 2007 Transaction ID: SA11A1.11787 Amount of Each Receipt this Period 360.00 payroll deduction (\$90x4)
B. Full Name (Last, First, Middle Initial) David L. Miller Mailing Address 313 Cambridge Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation President CCX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1890.00			Date of Receipt MM / DD / YYYY 05 / 10 / 2007 Transaction ID: SA11A1.11465 Amount of Each Receipt this Period 360.00 payroll deduction (\$90x4)
C. Full Name (Last, First, Middle Initial) David L. Miller Mailing Address 313 Cambridge Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation President CCX Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2340.00			Date of Receipt MM / DD / YYYY 06 / 10 / 2007 Transaction ID: SA11A1.11561 Amount of Each Receipt this Period 450.00 payroll deduction (\$90x5)

SUBTOTAL of Receipts This Page (optional)

1170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Bruce A. Moss			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7	
Mailing Address 9263 Baron Way			Transaction ID: SA11A1.11277	
City Saline	State MI	Zip Code 48176	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Con-Way Central Express		Occupation VP Sales	payroll deduction (\$25x5)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		
B. Full Name (Last, First, Middle Initial) Bruce A. Moss			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7	
Mailing Address 9263 Baron Way			Transaction ID: SA11A1.11371	
City Saline	State MI	Zip Code 48176	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Con-Way Central Express		Occupation VP Sales	payroll deduction (\$25x4)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		
C. Full Name (Last, First, Middle Initial) Bruce A. Moss			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 9263 Baron Way			Transaction ID: SA11A1.11788	
City Saline	State MI	Zip Code 48176	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Con-Way Central Express		Occupation VP Sales	payroll deduction (\$25x4)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Bruce A. Moss Mailing Address 9263 Baron Way City Saline State MI Zip Code 48176 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Central Express Occupation VP Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11466 Amount of Each Receipt this Period 100.00 payroll deduction (\$25x4)
B. Full Name (Last, First, Middle Initial) Bruce A. Moss Mailing Address 9263 Baron Way City Saline State MI Zip Code 48176 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Central Express Occupation VP Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11562 Amount of Each Receipt this Period 125.00 payroll deduction (\$25x5)
C. Full Name (Last, First, Middle Initial) Charles R. Mullett Mailing Address 301 Archer Ct. City Beryville State VA Zip Code 22611 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation Director, Govt. Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11424 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)

Charles R. Mullett

Mailing Address 301 Archer Ct.

City State Zip Code
 Beryville VA 22611

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNF Inc.

Occupation
Director, Govt. Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11519

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

B. Full Name (Last, First, Middle Initial)

Mr. Thomas Nightingale

Mailing Address 5157 Polo Fields Dr.

City State Zip Code
 Ann Arbor MI 48103

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNF

Occupation
VP Communications & CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11216

Amount of Each Receipt this Period

125.00

payroll deduction (\$25x5)

C. Full Name (Last, First, Middle Initial)

Mr. Thomas Nightingale

Mailing Address 5157 Polo Fields Dr.

City State Zip Code
 Ann Arbor MI 48103

FEC ID number of contributing
federal political committee.

C

Name of Employer
CNF

Occupation
VP Communications & CMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11308

Amount of Each Receipt this Period

100.00

payroll deduction (\$25x4)

SUBTOTAL of Receipts This Page (optional)

275.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 55

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Thomas Nightingale Mailing Address 5157 Polo Fields Dr. City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer CNF Occupation VP Communications & CMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 425.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11724 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> payroll deduction (\$25x4)	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	4		1	0		2	0	0	7																								
100.00																																	
B. Full Name (Last, First, Middle Initial) Mr. Thomas Nightingale Mailing Address 5157 Polo Fields Dr. City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer CNF Occupation VP Communications & CMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11404 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> payroll deduction (\$25x4)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	5		1	0		2	0	0	7																								
100.00																																	
C. Full Name (Last, First, Middle Initial) Mr. Thomas Nightingale Mailing Address 5157 Polo Fields Dr. City Ann Arbor State MI Zip Code 48103 FEC ID number of contributing federal political committee. C Name of Employer CNF Occupation VP Communications & CMO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.11499 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">125.00</td> </tr> </table> payroll deduction (\$25x5)	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	7	125.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	6		1	0		2	0	0	7																								
125.00																																	

SUBTOTAL of Receipts This Page (optional)

325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Kelly Peeks Mailing Address 4257 Forest Hill Rd. S. City State Zip Code Olive Branch MS 36654 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Occupation Mgr. Safety Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11426 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
B. Full Name (Last, First, Middle Initial) Kelly Peeks Mailing Address 4257 Forest Hill Rd. S. City State Zip Code Olive Branch MS 36654 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Occupation Mgr. Safety Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11521 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
C. Full Name (Last, First, Middle Initial) Mr. Danny D. Pence Mailing Address 3660 N. Washington City State Zip Code Danville IN 46122 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Occupation Mgr. Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11467 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
SUBTOTAL of Receipts This Page (optional) ▶			130.00
TOTAL This Period (last page this line number only) ▶			

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 55

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Danny D. Pence Mailing Address 3660 N. Washington City State Zip Code Danville IN 46122 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Svcs. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Mgr. Region Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11563 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
B. Full Name (Last, First, Middle Initial) Jennifer Rosenfeld- Pileggi Mailing Address 3852 Jefferson Avenue City State Zip Code Redwood City CA 94062 FEC ID number of contributing federal political committee. C Name of Employer CNF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Sr. VP, Gen. Counsel/Sec. Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11409 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
C. Full Name (Last, First, Middle Initial) Jennifer Rosenfeld- Pileggi Mailing Address 3852 Jefferson Avenue City State Zip Code Redwood City CA 94062 FEC ID number of contributing federal political committee. C Name of Employer CNF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Sr. VP, Gen. Counsel/Sec. Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11504 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Lynn Reinbolt		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 129 Charles Thomas Blvd.		Transaction ID: SA11A1.11496
City State Zip Code Searcy AR 72143	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C	payroll deduction (\$10x4)	
Name of Employer Road Systems	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) Lynn Reinbolt		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 7
Mailing Address 129 Charles Thomas Blvd.		Transaction ID: SA11A1.11592
City State Zip Code Searcy AR 72143	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	payroll deduction (\$10x5)	
Name of Employer Road Systems	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C. Full Name (Last, First, Middle Initial) Mr. James T. Riordan		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 7
Mailing Address 1174 W. Russell Road		Transaction ID: SA11A1.11375
City State Zip Code Tecumseh MI 49286	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C	payroll deduction (\$20x4)	
Name of Employer Con-Way Transportation Service	Occupation Dir. Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James T. Riordan
Mailing Address 1174 W. Russell Road

City State Zip Code
Tecumseh MI 49286

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transportation Service

Occupation
Dir. Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11792

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

B. Full Name (Last, First, Middle Initial)
Mr. James T. Riordan
Mailing Address 1174 W. Russell Road

City State Zip Code
Tecumseh MI 49286

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transportation Service

Occupation
Dir. Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11470

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

C. Full Name (Last, First, Middle Initial)
Mr. James T. Riordan
Mailing Address 1174 W. Russell Road

City State Zip Code
Tecumseh MI 49286

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transportation Service

Occupation
Dir. Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11566

Amount of Each Receipt this Period

100.00

payroll deduction (\$20x5)

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City State Zip Code
 Tucson AZ 85742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sv-
cs.Occupation
Mgr. Service Center 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11472

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

B. Full Name (Last, First, Middle Initial)
Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City State Zip Code
 Tucson AZ 85742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Sv-
cs.Occupation
Mgr. Service Center 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11568

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

C. Full Name (Last, First, Middle Initial)
Keith A. Sawallich

Mailing Address 2114 NW Jessamine Way

City State Zip Code
 Portland OR 97229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Central ExpressOccupation
Region Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11473

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Keith A. Sawallich Mailing Address 2114 NW Jessamine Way City State Zip Code Portland OR 97229 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Central Express Occupation Region Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11569 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
B. Full Name (Last, First, Middle Initial) David Slate Mailing Address 1855 Mar West St. City State Zip Code Tiburon CA 94920 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation VP Dep. Gen. Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11315 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
C. Full Name (Last, First, Middle Initial) David Slate Mailing Address 1855 Mar West St. City State Zip Code Tiburon CA 94920 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation VP Dep. Gen. Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11730 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
SUBTOTAL of Receipts This Page (optional) ▶			210.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) David Slate Mailing Address 1855 Mar West St. City Tiburon State CA Zip Code 94920 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation VP Dep. Gen. Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11410 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
B. Full Name (Last, First, Middle Initial) David Slate Mailing Address 1855 Mar West St. City Tiburon State CA Zip Code 94920 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation VP Dep. Gen. Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11505 Amount of Each Receipt this Period 100.00 payroll deduction (\$20x5)
C. Full Name (Last, First, Middle Initial) Neil E. Smith, Jr. Mailing Address 9011 Emerson Drive City Saline State MI Zip Code 48716 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Occupation Dir. Quality Assurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11478 Amount of Each Receipt this Period 40.00 payroll deduction (\$10x4)
SUBTOTAL of Receipts This Page (optional) ▶		220.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Neil E. Smith, Jr. Mailing Address 9011 Emerson Drive City Saline State MI Zip Code 48716 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Occupation Dir. Quality Assurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11574 Amount of Each Receipt this Period 50.00 payroll deduction (\$10x5)
B. Full Name (Last, First, Middle Initial) Douglas Stotlar Mailing Address 8400 Cedar Hills Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation Ex. VP--Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 450.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11224 Amount of Each Receipt this Period 250.00 payroll deduction (\$50x5)
C. Full Name (Last, First, Middle Initial) Douglas Stotlar Mailing Address 8400 Cedar Hills Dr. City Dexter State MI Zip Code 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Occupation Ex. VP--Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Aggregate Year-to-Date ▼ <input type="checkbox"/> Other (specify) ▼ 650.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11317 Amount of Each Receipt this Period 200.00 payroll deduction (\$50x4)
SUBTOTAL of Receipts This Page (optional) ▶			500.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Douglas Stotlar Mailing Address 8400 Cedar Hills Dr. City State Zip Code Dexter MI 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Ex. VP--Operations Aggregate Year-to-Date ▼ 850.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11732 Amount of Each Receipt this Period 200.00 payroll deduction (\$50x4)
B. Full Name (Last, First, Middle Initial) Douglas Stotlar Mailing Address 8400 Cedar Hills Dr. City State Zip Code Dexter MI 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Ex. VP--Operations Aggregate Year-to-Date ▼ 1050.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11412 Amount of Each Receipt this Period 200.00 payroll deduction (\$50x4)
C. Full Name (Last, First, Middle Initial) Douglas Stotlar Mailing Address 8400 Cedar Hills Dr. City State Zip Code Dexter MI 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Ex. VP--Operations Aggregate Year-to-Date ▼ 1300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11508 Amount of Each Receipt this Period 250.00 payroll deduction (\$50x5)

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mark Thickpenny			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 800 High School Way Apt. 321			Transaction ID: SA11A1.11414	
City State Zip Code Mountain View CA 94041-1984			Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$10x4)	
Name of Employer Con-Way		Occupation VP Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		
B. Full Name (Last, First, Middle Initial) Mark Thickpenny			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7	
Mailing Address 800 High School Way Apt. 321			Transaction ID: SA11A1.11509	
City State Zip Code Mountain View CA 94041-1984			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$10x5)	
Name of Employer Con-Way		Occupation VP Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		
C. Full Name (Last, First, Middle Initial) Mr. Richard D. Trott			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7	
Mailing Address 1681 Waterside Ct.			Transaction ID: SA11A1.11387	
City State Zip Code Ann Arbor MI 48108			Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C			payroll deduction (\$20x4)	
Name of Employer Con-Way Transp. Services		Occupation VP Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. Richard D. Trott Mailing Address 1681 Waterside Ct. City Ann Arbor State MI Zip Code 48108 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Services Occupation VP Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11804 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
B. Full Name (Last, First, Middle Initial) Mr. Richard D. Trott Mailing Address 1681 Waterside Ct. City Ann Arbor State MI Zip Code 48108 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Services Occupation VP Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11482 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
C. Full Name (Last, First, Middle Initial) Mr. Richard D. Trott Mailing Address 1681 Waterside Ct. City Ann Arbor State MI Zip Code 48108 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Services Occupation VP Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11578 Amount of Each Receipt this Period 100.00 payroll deduction (\$20x5)
SUBTOTAL of Receipts This Page (optional) ▶			260.00
TOTAL This Period (last page this line number only) ▶			

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 55

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Arthur W. Waggoner

Mailing Address 6417 Remington Parkway

City	State	Zip Code
Colleyville	TX	76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way TransportationOccupation
Mgr. Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	0	7

Transaction ID: SA11A1.11484

Amount of Each Receipt this Period

40.00

payroll deduction (\$10x4)

Full Name (Last, First, Middle Initial)

B. Arthur W. Waggoner

Mailing Address 6417 Remington Parkway

City	State	Zip Code
Colleyville	TX	76034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way TransportationOccupation
Mgr. Region

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	7

Transaction ID: SA11A1.11580

Amount of Each Receipt this Period

50.00

payroll deduction (\$10x5)

Full Name (Last, First, Middle Initial)

C. James P. Worthington

Mailing Address 701 Barbara Lane

City	State	Zip Code
Keller	TX	76248-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
Con-Way Transportation Se-
viceOccupation
President CSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	0	/	2	0	0	7

Transaction ID: SA11A1.11299

Amount of Each Receipt this Period

200.00

payroll deduction (\$40x5)

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) James P. Worthington Mailing Address 701 Barbara Lane City State Zip Code Keller TX 76248-2802 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Service Occupation President CSE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11393 Amount of Each Receipt this Period 160.00 payroll deduction (\$40x4)
B. Full Name (Last, First, Middle Initial) James P. Worthington Mailing Address 701 Barbara Lane City State Zip Code Keller TX 76248-2802 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Service Occupation President CSE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11810 Amount of Each Receipt this Period 160.00 payroll deduction (\$40x4)
C. Full Name (Last, First, Middle Initial) James P. Worthington Mailing Address 701 Barbara Lane City State Zip Code Keller TX 76248-2802 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transportation Service Occupation President CSE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 840.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11488 Amount of Each Receipt this Period 160.00 payroll deduction (\$40x4)

SUBTOTAL of Receipts This Page (optional)

480.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. James P. Worthington

Mailing Address 701 Barbara Lane

City State Zip Code
 Keller TX 76248-2802

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transportation ServiceOccupation
President CSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11584

Amount of Each Receipt this Period

200.00

payroll deduction (\$40x5)

Full Name (Last, First, Middle Initial)

B. Dean Wright

Mailing Address P.O. Box 2062

City State Zip Code
 Menlo Park CA 94026

FEC ID number of contributing federal political committee.

C

Name of Employer
CNF Inc.Occupation
Mgr. Equipment Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11319

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

C. Dean Wright

Mailing Address P.O. Box 2062

City State Zip Code
 Menlo Park CA 94026

FEC ID number of contributing federal political committee.

C

Name of Employer
CNF Inc.Occupation
Mgr. Equipment Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11734

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Dean Wright Mailing Address P.O. Box 2062 City State Zip Code Menlo Park CA 94026 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation Mgr. Equipment Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11415 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)
B. Full Name (Last, First, Middle Initial) Dean Wright Mailing Address P.O. Box 2062 City State Zip Code Menlo Park CA 94026 FEC ID number of contributing federal political committee. C Name of Employer CNF Inc. Occupation Mgr. Equipment Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00			Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11510 Amount of Each Receipt this Period 100.00 payroll deduction (\$20x5)
C. Full Name (Last, First, Middle Initial) Mr. Michael D. Yuenger Mailing Address 7448 Black Forest Dr. City State Zip Code Dexter MI 48130 FEC ID number of contributing federal political committee. C Name of Employer Con-Way Transp. Services Occupation VP/Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.11394 Amount of Each Receipt this Period 80.00 payroll deduction (\$20x4)

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City State Zip Code
 Dexter MI 48130

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transp. ServicesOccupation
VP/Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11811

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

B. Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City State Zip Code
 Dexter MI 48130

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transp. ServicesOccupation
VP/Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11489

Amount of Each Receipt this Period

80.00

payroll deduction (\$20x4)

Full Name (Last, First, Middle Initial)

C. Mr. Michael D. Yuenger

Mailing Address 7448 Black Forest Dr.

City State Zip Code
 Dexter MI 48130

FEC ID number of contributing federal political committee.

C

Name of Employer
Con-Way Transp. ServicesOccupation
VP/Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.11585

Amount of Each Receipt this Period

100.00

payroll deduction (\$20x5)

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

14777.60

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ALEXANDER FOR SENATE 2008 INC

Mailing Address 611 COMMERCE STREET SUITE 2920

City NASHVILLE State TN Zip Code 37203

Purpose of Disbursement
Contribution

Candidate Name
LAMAR ALEXANDER

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 00

Transaction ID: SB23.11601

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name
SUSAN M COLLINS

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 00

Transaction ID: SB23.11604

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Mailing Address 120 MARYLAND AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.11593

Date of Disbursement

01 / 30 / 2007

Amount of Each Disbursement this Period

15000.00

SUBTOTAL of Disbursements This Page (optional)

17500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS FOR HARRY REID

Mailing Address PO BOX 19163

City
LAS VEGAS

State
NV

Zip Code
89132

Purpose of Disbursement
Contribution

Candidate Name
HARRY REID

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 00

Transaction ID: SB23.11597

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BENNIE THOMPSON

Mailing Address P.O. Box 100
P.O. Box 100

City
Bolton

State
MS

Zip Code
39041

Purpose of Disbursement
Contribution

Candidate Name
BENNIE G. THOMPSON

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MS District: 2

Transaction ID: SB23.11611

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF GORDON SMITH

Mailing Address 228 S WASHINGTON STE 115

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
Contribution

Candidate Name
GORDON HAROLD SMITH

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 00

Transaction ID: SB23.11608

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM OBERSTAR

Mailing Address 1017 8th St NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
JAMES L HON. OBERSTAR

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 8

Transaction ID: SB23.11607

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LUNGREN FOR CONGRESS

Mailing Address 9321 Silverbend Lane

City
Elk Grove

State
CA

Zip Code
95624

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
DANIEL E LUNGREN

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 03

Transaction ID: SB23.11614

Date of Disbursement

06 / 19 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. MCCONNELL SENATE COMMITTEE '08

Mailing Address PO BOX 1496

City
LOUISVILLE

State
KY

Zip Code
40201

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
MITCH MCCONNELL

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 00

Transaction ID: SB23.11594

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

30000.00